

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application: Kirkland §
 Serial No.: 10/087,952 §
 Filed: February 27, 2002 §
 For: Apparatus and Method for §
 Generating Graphic Representation §
 of Estimated Time of Completion of a §
 Server Request §

RECEIVED
CENTRAL FAX CENTER
Group Art Unit: 2161
Examiner: Nguyen, Cindy
Attorney Docket No.: AUS920020019US1

MAY 19 2005

Certificate of Transmission Under 37 C.F.R. § 1.8(a)
 I hereby certify this correspondence is being transmitted via
 facsimile to the Commissioner for Patents, P.O. Box 1450,
 Alexandria, VA 22313-1450, facsimile number (703) 872-
 9306, on May 19, 2005.

By: Monica Gomez
 Monica Gomez

RESPONSE TO OFFICE ACTION

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

No fees are believed to be required. If, however, any fees are required, I authorize the Commissioner to charge these fees which may be required to IBM Corporation Deposit Account No. 09-0447. No extension of time is believed to be necessary. If, however, an extension of time is required, the extension is requested, and I authorize the Commissioner to charge any fees for this extension to IBM Corporation Deposit Account No. 09-0447.

In response to the Office Action dated February 25, 2005, please amend the above-identified application as follows:

Listing of the Claims begins on page 2 of this paper.

Remarks begin on page 10 of this paper.

05/26/2005 KWATSON 00000004 090447 18087952

01 FC:1201 200.00 DA

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/087952
AUS9200720019051

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	43	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	43 minus 20 =	23
INDEPENDENT CLAIMS	6 minus 3 =	3
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	370.00	OR BASIC FEE	740.00
X\$ 9=		OR X\$18=	414
X42=		OR X84=	252
+140=		OR +280=	
TOTAL		OR TOTAL	1406

OTHER THAN
OR SMALL ENTITY

AMENDMENT A	SMALL ENTITY	OR	SMALL ENTITY	
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	X\$ 9=		OR X\$18=	
	X42=		OR X84=	
	+140=		OR +280=	
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

Best Available Copy

11/9/04 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	• 43	Minus	• 43 = —
	Independent	• 5	Minus	• 5 = —
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

AMENDMENT B	SMALL ENTITY	OR	SMALL ENTITY	
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	X\$ 9=		OR X\$18=	
	X42=		OR X84=	
	+140=		OR +280=	
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B	SMALL ENTITY	OR	SMALL ENTITY	
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	X\$ 9=		OR X\$18=	
	X42=		OR X84=	
	+140=		OR +280=	
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	•	Minus	• =
	Independent	•	Minus	• =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

AMENDMENT C	SMALL ENTITY	OR	SMALL ENTITY	
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	X\$ 9=		OR X\$18=	
	X42=		OR X84=	
	+140=		OR +280=	
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.